JULIETTE MANOR

169 EAST HURON STRE	EΤ	
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169 EAST HURON STREET			
BERLIN 54923 Phone: (920) 361-3092		Ownership:	Non-Profit Corporation
Operated from $1/1$ To $12/31$ Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	Yes	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/03):	84	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/03):	84	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/03:	75	Average Daily Census:	76

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (1	12/31/03)	Length of Stay (12/31/03)	%
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis					28.0
Supp. Home Care-Household Services	No	Developmental Disabilities		Under 65	4.0	More Than 4 Years	12.0
Day Services	No	Mental Illness (Org./Psy)	25.3	65 - 74	8.0		
Respite Care	No	Mental Illness (Other)	8.0	75 - 84	30.7		72.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	50.7	*********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.7	Full-Time Equivalent	
Congregate Meals	No	Cancer	1.3			Nursing Staff per 100 Resi	dents.
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)	
Other Meals	No	Cardiovascular	17.3	65 & Over	96.0		
Transportation	No	Cerebrovascular	12.0			RNs	12.2
Referral Service	No	Diabetes	1.3	Gender	용	LPNs	7.7
Other Services	No	Respiratory	2.7			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	30.7	Male	32.0	Aides, & Orderlies	42.4
Mentally Ill	No	[		Female	68.0		
Provide Day Programming for		1	100.0				
Developmentally Disabled	No	I		l	100.0		

## Method of Reimbursement

		edicare itle 18			edicaio itle 19		Other		Private Family Pay Care				Managed Care							
Level of Care	No.	90	Per Diem (\$)	No.	%	Per Diem (\$)	No.	90	Per Diem (\$)	No.	엉	Per Diem (\$)	No.	용	Per Diem (\$)	No.	엉	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	8	100.0	312	44	93.6	112	2	100.0	112	17	100.0	150	0	0.0	0	1	100.0	170	72	96.0
Intermediate				3	6.4	98	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	4.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependen	_	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	8	100.0		47	100.0		2	100.0		17	100.0		0	0.0		1	100.0		75	100.0

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Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services,	and Activities as of 12/3	31/03
Deaths During Reporting Period					0. 27 - 21		m1
Percent Admissions from:		   Activities of	96		% Needing sistance of	° mo+all	Total Jumber of
	7.0		0			=	
Private Home/No Home Health			-	One	Or Two Staff	- I	Residents
Private Home/With Home Health	0.0		0.0		78.7	21.3	75
2	1.4		20.0		56.0	24.0	75
Acute Care Hospitals	86.0	Transferring	29.3		46.7	24.0	75
Psych. HospMR/DD Facilities	0.5	Toilet Use	28.0		45.3	26.7	75
Rehabilitation Hospitals	0.0	Eating	68.0		17.3	14.7	75
Other Locations	5.0	* * * * * * * * * * * * * * * * * * *	*****	*****	*****	******	******
Total Number of Admissions	222	Continence		%	Special Treatm	nents	용
Percent Discharges To:		Indwelling Or Extern	al Catheter	5.3	Receiving Re	spiratory Care	6.7
Private Home/No Home Health	35.3	Occ/Freq. Incontinen	t of Bladder	40.0	Receiving Tr	acheostomy Care	0.0
Private Home/With Home Health	14.0	Occ/Freq. Incontinen	t of Bowel	16.0	Receiving Su	ctioning	1.3
Other Nursing Homes	1.9				Receiving Os	stomy Care	0.0
Acute Care Hospitals	9.8	Mobility			Receiving Tu	be Feeding	1.3
Psych. HospMR/DD Facilities	0.9	Physically Restraine	d	2.7	Receiving Me	chanically Altered Diets	29.3
Rehabilitation Hospitals	0.0	 					
Other Locations	12.1	Skin Care			Other Resident	Characteristics	
Deaths	26.0	With Pressure Sores		0.0	Have Advance	Directives	100.0
Total Number of Discharges		With Rashes		2.7	Medications		
(Including Deaths)	215				Receiving Ps	ychoactive Drugs	25.3

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	This	Other	Other Hospital-		All
	Facility	Based F	Based Facilities		ilties
	8	8	Ratio	용	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	84.6	90.1	0.94	87.4	0.97
Current Residents from In-County	41.3	83.8	0.49	76.7	0.54
Admissions from In-County, Still Residing	5.9	14.2	0.41	19.6	0.30
Admissions/Average Daily Census	292.1	229.5	1.27	141.3	2.07
Discharges/Average Daily Census	282.9	229.2	1.23	142.5	1.99
Discharges To Private Residence/Average Daily Census	139.5	124.8	1.12	61.6	2.26
Residents Receiving Skilled Care	96.0	92.5	1.04	88.1	1.09
Residents Aged 65 and Older	96.0	91.8	1.05	87.8	1.09
Title 19 (Medicaid) Funded Residents	62.7	64.4	0.97	65.9	0.95
Private Pay Funded Residents	22.7	22.4	1.01	21.0	1.08
Developmentally Disabled Residents	1.3	1.2	1.12	6.5	0.21
Mentally Ill Residents	33.3	32.9	1.01	33.6	0.99
General Medical Service Residents	30.7	22.9	1.34	20.6	1.49
Impaired ADL (Mean)*	46.9	48.6	0.97	49.4	0.95
Psychological Problems	25.3	55.4	0.46	57.4	0.44
Nursing Care Required (Mean) *	5.2	7.0	0.74	7.3	0.71